Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			60		· ····································			RATE FEE		1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
тс	TAL CHARGEA	BLE CLAIMS	60 minus 20= *		· 40			X\$ 9=		OR	X\$18=	720
INC	EPENDENT CL	_AIMS	4 mii	inus 3 = [*] j				X40=		OR	X80=	80
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	1510	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3))	SMALL	ENTITY	OTHER SMALL		
ENT A	PART AND	CLAIMS REMAINING AFTER AMENDMENT	***	HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=]]	X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF MI	Minus	***	F.CL AINA] =	11	X40=		OR	X80=	
	FIRST PRESE	INTATION OF MI	JUNPLE DEF	ENDEN	CLAIM		, [+135=		OR	+270=	
			:				L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)							.0011.1 EE		• ,	ADDIT: 1 EE	
AMENDMENT B	**************************************	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	.**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		<u> </u> =	1	X40=		OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┛╏	+135=			+270=	
							L	TOTAL		OR	TOTAL	
								DDIT. FEE		OR	ADDIT. FEE	
		(Column 1) CLAIMS		(Colur		(Column 3)	1 -					
ENTC		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**		=	11	X\$ 9=		OR	X\$18=	1,55
AMENDMENT	Independent	*	Minus	***	· ·	=] -	X40=			X80=	
Ľ	FIRST PRESE	NTATION OF MU	ILTIPLE DEPENDENT CLAIM					7.75-		OR		
• 1	f the entry in colu	mn 1 is loss than th	a antru in colu	mn 2 write	. "O" in oo!	ump 3	L	+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

PATENT APPLICATION FEE DETERMINATION RECOI								Application or Docket Number					
Effective October 1, 2000 Q (con 201)													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
TC	TAL CLAIMS	60					F	ATE	FEE	1 1	RATE	FEE	
FOR			NUMBER FILED		NUMB	ER EXTRA	ВА	SIC FEE	355.00	OR	BASIC FEE	· 710.00	
то	TAL CHARGEA	BLE CLAIMS	₩ minus 20=		* (fo	X\$ 9=			OR	X\$18=	720	
IND	EPENDENT CL	AIMS	₩ mi	nus 3 =	*	İ	, ,		OR	X80=	80		
MULTIPLE DEPENDENT CLAIM PRESENT							+135=		OR	+270=			
* If the difference in column 1 is less than zero, enter "0" in column 2							T(OTAL		OR	TOTAL	1510	
CLAIMS AS AMENDED - PART II											OTHER	1.0	
	E 27.2	(Column 1)	163448. 2008. 787.74	(Colur		(Column 3)	SI	MALL	ENTITY	OR	SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDM	Total	*	Minus	**		=	x	\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=	×	40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							135=			+270=		
	· v						Ļ	TOTAL		OR	TOTAL		
							ADDIT. FEEOR ADDIT. FEE						
_		(Column 1) CLAIMS		(Colur HIGH		(Column 3)	1 —		ADDI-	1 1	-	ADDI-	
IENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA	R	ATE	TIONAL FEE		RATE	TIONAL FEE	
AMENDM	Total	*	Minus	**		=	×	\$ 9=		OR	X\$18=	ľ	
AME	Independent	* NTATION OF MU	Minus	***	CLAINA	=	X	40=		OR	X80=		
_	FINOT PRESE	NIATION OF MI	DETIPLE DET	CNDCNI	CLAIIVI		+1	135=		OR	+270=		
								TOTAL IT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colur		(Column 3)							
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT C	Total	•	Minus	**		=	X	\$ 9=		OR	X\$18=		
	Independent	*	Minus	***]=		40=		OR	X80=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J ├─						
	If the entry in colu	mn 1 is less than th	ne entry in colu	mn 2 write	a "0" in co	lumn 3		35=		OR	+270=		
**	If the "Highest Nu	mber Previously Pa	aid For" IN THI	S SPACE i	s less tha	n 20, enter "20.		TOTAL T. FEE		OR	TOTAL ADDIT. FEE		
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													